

CC  
1-14-1  
AC

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>AS</i>	<i>45</i>	<i>12/26</i>
FORMALITY REVIEW	<i>Sm</i>	<i>879</i>	<i>01-05-01</i>
RESPONSE FORMALITY REVIEW	<i>Jen</i>	<i>67718</i>	<i>5/25/4</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	4/23/04
2	✓
3	✓
4	✓
5	✓
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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